## STATE OF NORTH DAKOTA DEPARTMENT OF HUMAN SERVICES STATE HOSPITAL 2605 CIRCLE DRIVE JAMESTOWN, ND 58401

## **SOLICITATION QUESTIONS**

Date: May 16, 2006

REQUEST FOR PROPOSAL # AND TITLE: #325-06-06-014 – Transitional Living Facilities

SOLICITATION QUESTIONS AND ANSWERS: 1

Section **1.05 Deadline for Receipt of Questions** established a deadline of 5:00 p.m., **Friday, May 26, 2006** for receipt of questions. The responses to questions that were raised at the Conference on Monday, May 15, 2006 are as follows:

1. **Statement**: The proposal states that the use of existing or rented buildings and not new construction is required.

**Question**: Is this a mandatory requirement or can vendors submit proposals that include new construction or new additions to existing buildings as long as the rates would be within the Department's budget?

**Response**: The Department will entertain proposals that include new construction or new additions to existing buildings, however, providers will be responsible for these costs. The Department will award a contract to the vendor that has the best proposal based on daily residential rates.

- 2. **Question**: What concerns need to be addressed regarding zoning for this type of facility? **Response**: The vendor will be responsible for clarifying zoning requirements with their city officials to make sure that the facility can be placed in a certain section of the city.
- 3. **Question**: What Life Safety Code will be applied to this facility? **Response**: The vendor will need to follow the local municipality requirements for Life Safety Code.
- 4. Question: What Safety / Security measures will be required for this facility? Response: The vendor will need to implement reasonable safety and security measures to provide a safe living environment for the clients. This may include door alarms, ankle monitors, window locks, etc.
- 5. **Question**: What type of living arrangements need to be provided for clients in the facility? **Response**: Individual sleeping rooms would be preferable. It would be allowable to have two clients share a sleeping room.
- 6. **Question**: What staffing ratios need to be meet for this facility? **Response**: The vendor will need to provide adequate staffing coverage to provide proper oversight for the program and for the clients. This includes a minimum of an RN to oversee the medication management and other staff as appropriate to provide the required services to the clients. The Department will also require a program director/case manager to manage the program.
- 7. **Question**: How will vendors implement the costs for equipment, supplies, etc. to equip the facility? **Response**: The vendor should include these costs when they establish their residential rates.
- 8. **Question**: If a client fails to be eligible for the program what process does the vendor have to get the client readmitted to the State Hospital?

**Response**: The vendor will need to have the client screened by the local Human Service prior to any readmission to the State Hospital.

Question: What licensure requirement will need to be in place for this facility?
 Response: The facility will not be accredited by the Health Department so whatever local or state licenses are required for Transitional Living Facilities would need to be obtained by the vendor.

10. **Question**: What type of auditing will be required for the vendors regarding their management of the facility?

**Response**: The Department of Human Services will do a Provider Audit of the vendor to verify costs, rates, etc.

11. **Question**: How will the Department handle the cost of care for clients if they are hospitalized for a period of time? For instance if a client is hospitalized for 15 days will the Department still pay the vendor for the daily rates at the TL Facility?

**Response**: The Department will need to review the legal status of this question and will provide the vendors with their written opinion on this issue.

12. **Question**: If the TL Facility only has ten of the fifteen beds filled will the Department still pay the facility for the complete 15 bed occupancy?

**Response**: The Department does not anticipate that there will be any vacancy at these facilities. We will provide a written opinion to vendors on this issue.

If the vendors have questions or concerns with these responses they are reminded that the deadline for submitting written questions is 5:00 p.m., **Friday**, **May 26**, **2006**. The State will respond to all written questions by **Wednesday**, **May 31**, **2006**.

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